out the form and print 5 copies. Sign es meeded and route as specified below. 😥

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

DUNITE ORKIN DAKER	DARRYL ORRIN BAKER		COURT CASE NUMBER CA-05-0147	
DEFENDANT	TYPE OF PROCESS		+ /	
UNITED STATES ATTORNEY	CIVIL			
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE C	OR DESCRIPTI		O SEIZE OR CONDEMN	
SERVE UNITED STATES ATTORNEY				
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)				
UNITED STATES COURTHOUSE, 601 MARK	ET STR	EET PHILADE	ELPHIA 19106	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW				
			1	
DARRYL ORRIN BAKER	Num	ber of parties to be		
REG. NO.# 19613-039 FEDERAL PRISON CAMP	served in this case		7	
P.O. BOX 2000		6		
LEWISBURG, PA 17837	on U	k for service S.A.		
PECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING IN Telephone Numbers, and Estimated Times Available for Service):	O SEKVICE (I	iciuae pusiness and Al	Hermale Maresses,	
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			0/12/2005	
Darry Bater Defendant		·	9/13/2005	
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PER ATTACHED COPY OF ENVELOPE.

PRINT 5 COPIES: 1. CLERK OF THE COURT

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal
- 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rcv. 12/15/80 Automated 01/00